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<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b> <i>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</i>		Docket Number (Optional) 3868-0160PUS1
Application Number	10/523,012-Conf. #7480	Filed February 1, 2005
For MEDICAMENT AND METHOD FOR REDUCING ALCOHOL AND/OR TOBACCO CONSUMPTION		
Art Unit	1615	Examiner J. T. Palenik
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.		
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):		
<input type="checkbox"/>	One month (37 CFR 1.17(a)(1))	Fee \$130      Small Entity Fee \$65      \$ _____
<input checked="" type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	Fee \$490      Small Entity Fee \$245      \$ 180.00**
<input type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	Fee \$1110      Small Entity Fee \$555      \$ _____
<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	Fee \$1730      Small Entity Fee \$865      \$ _____
<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	Fee \$2350      Small Entity Fee \$1175      \$ _____
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. <input type="checkbox"/> A check in the amount of the fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>02-2448</u> .		
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.		
I am the <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>42,874</u> <input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 <u>_____</u>		
 Signature <u>Craig A. McRobbie</u> Typed or printed name		<u>MAY 08 2009</u> Date <u>(703) 205-8000</u> Telephone Number
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.		
<input type="checkbox"/> Total of <u>1</u> forms are submitted.		

\*\* An extension of time of one month in the amount of \$65 was previously paid to the USPTO on April 10, 2009. Thus, in this filing, Applicants are paying the second month extension of time minus the payment of \$65 for the previous extension of time.